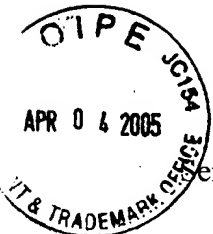


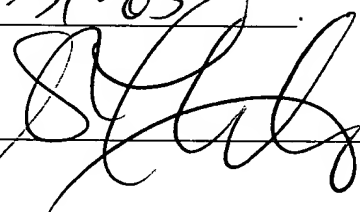
RCE
ZPW



CERTIFICATE OF MAILING

I hereby certify that the below listed items are being deposited with the U.S. Postal service as first class mail in an envelope addressed to:

**Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450**

on 3-31-05


Jeffrey R. Kuester

In Re Application of:

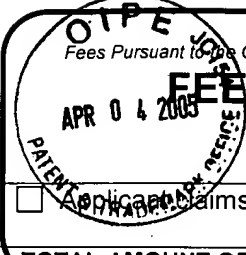
| | |
|------------------------|----------------------------------|
| Jerding, et al. | Confirmation No.: 1996 |
| Serial No.: 09/590,434 | Group Art Unit: 2614 |
| Filed: June 9, 2000 | Examiner: Beliveau, Scott E. |
| | Docket No.: A-6594 (191910-1480) |

For: **Video Promotional and Advertising Systems for Video on Demand System**

The following is a list of documents enclosed:

- Return Postcard
- RCE Transmittal
- Amendment Transmittal
- Petition for Extension of Time - 1 month
- Fee Transmittal
- Credit Card - Authorizing \$910.00
- Response to Final Office Action

Further, the Commissioner is authorized to charge Deposit Account No. 20-0778 for any additional fees required. The Commissioner is requested to credit any excess fee paid to Deposit Account No. 20-0778.

| | | | | | | | | | | | | | |
|---|---|--------------------|-------------------|-------------|---------------------|----------------------|------------------------|---------------|---------------------------|----------|-------------|---------------------|-----------------------------|
| <div style="text-align: center;">  <p>Effective on 12/08/2004 Fees Pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</p> <p>FREE TRANSMITTAL For FY 2005</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p> </div> | <p style="text-align: center;">Complete if Known</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>Application Number</td> <td>09/590,434</td> </tr> <tr> <td>Filing Date</td> <td>June 9, 2000</td> </tr> <tr> <td>First Named Inventor</td> <td>Jerding, et al.</td> </tr> <tr> <td>Examiner Name</td> <td>Beliveau, Scott E.</td> </tr> <tr> <td>Art Unit</td> <td>2614</td> </tr> <tr> <td>Attorney Docket No.</td> <td>A-6594 (191910-1480)</td> </tr> </table> | Application Number | 09/590,434 | Filing Date | June 9, 2000 | First Named Inventor | Jerding, et al. | Examiner Name | Beliveau, Scott E. | Art Unit | 2614 | Attorney Docket No. | A-6594 (191910-1480) |
| Application Number | 09/590,434 | | | | | | | | | | | | |
| Filing Date | June 9, 2000 | | | | | | | | | | | | |
| First Named Inventor | Jerding, et al. | | | | | | | | | | | | |
| Examiner Name | Beliveau, Scott E. | | | | | | | | | | | | |
| Art Unit | 2614 | | | | | | | | | | | | |
| Attorney Docket No. | A-6594 (191910-1480) | | | | | | | | | | | | |
| <p>TOTAL AMOUNT OF PAYMENT (\$) 910.00</p> | | | | | | | | | | | | | |

METHOD OF PAYMENT (check all that apply)

☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify):

☐ Deposit Account Deposit Account Number: **20-0778** Deposit Account Name: **Thomas, Kayden, Horstemeyer Risley, L.L.P.**
 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | Filing Fees | | Search Fees | | Examination Fees | | Fees Paid (\$) |
|------------------|-------------|----------------------|-------------|----------------------|------------------|----------------------|----------------|
| | Fee (\$) | Small Entity Fee(\$) | Fee (\$) | Small Entity Fee(\$) | Fee (\$) | Small Entity Fee(\$) | |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | 0 |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | 0 |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | 0 |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | 0 |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | 0 |

2. EXCESSIVE CLAIM FEES

| Fee Description | Fee (\$) | Small Entity Fee(\$) |
|--|------------|----------------------|
| Each claim over 20 (including Reissues) | 50 | 25 |
| Each independent claim over 3 (including Reissues) | 200 | 100 |
| Multiple dependent claims | 360 | 180 |
| Total Claims | 25 | -20 or HP = 0 |
| Extra Claims | 50 | 0 |
| Fee Paid (\$) | 0 | |
| HP = highest number of total claims paid for, if great than 20 | | |
| Indep. Claims | 3 | -3 or HP = 0 |
| Extra Claims | 200 | 0 |
| Fee Paid (\$) | 0 | |
| HP = highest number of total claims paid for, if great than 3 | | |
| Multiple Dependent Claims | | |
| Fee (\$) | 360 | |
| Fee Paid (\$) | 0 | |

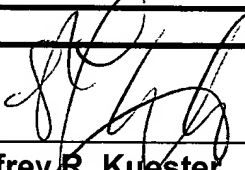
3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 USC 41(a)(1)(G) and 37 CFR 1.16(s)

| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
|--------------|--------------|--|----------|---------------|
| -100 = | /50= | (round up to a whole number) x | 250 = | 0 |

4. OTHER FEE(S)

| | Fee Paid (\$) |
|---|---------------|
| Non-English Specification, \$130 fee (no small entity discount) | 0 |
| Other: 1 month EOT; RCE | 910 |

| | | | |
|---------------------|---|---------------------------------|---|
| SUBMITTED BY | | Complete (if applicable) | |
| Signature |  | Registration No. 34,367 | Telephone Number 770-933-9500 |
| Name: (Print/Type) | Jeffrey R. Kuester | Date: | 3-31-05 |

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) and application. Confidentiality is governed by 35 USC 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. Send to Commissioner For Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2

AMENDMENT TRANSMITTAL LETTER (LARGE)

Docket No.

Applicant(s): **Jerding, et al.****A-6594 (191910-1480)**Serial No.
09/590,434Filing Date
June 9, 2000Examiner
Beliveau, Scott E.Confirmation No.
1996Group Art Unit
2614Invention: **Video Promotional and Advertising Systems for Video on Demand System****Commissioner for Patents
Mail Stop RCE
P.O. Box 1450
Alexandria VA 22313-1450**


Transmitted herewith is a Response to Office Action (with Amendments), RCE, and 1 month EOT in the above-identified application.

The fee has been calculated and is transmitted as shown below

CLAIMS AS AMENDED

| | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST # PREV. PAID FOR | NUMBER EXTRA CLAIMS PRESENT | RATE | ADDITIONAL FEE |
|---|---|--|--|--|-------------------|
| TOTAL CLAIMS | 25 - | 42 = | 0 | X \$50.00 | \$0 |
| INDEP. CLAIMS | 3 - | 11 = | 0 | X \$200.00 | \$0 |
| Multiple Dependent Claims (check if applicable) <input checked="" type="checkbox"/> | | | | \$360.00 | \$0 |
| EXTENSION FEE | 1 ST MONTH <input checked="" type="checkbox"/> \$120.00 | 2 ND MONTH <input type="checkbox"/> \$450.00 | 3 RD MONTH <input type="checkbox"/> \$1,020.00 | 4 TH MONTH <input type="checkbox"/> \$1,590.00 | \$120 |
| Other Fees: RCE | | | | | \$790 |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT | | | | | \$910.00 |

- ☐ No additional fee is required.
- ☐ Please charge Deposit Account No. _____ in the amount of _____. A duplicate copy of this page is enclosed.
- ☐ A check in the amount of _____ to cover the filing fee is enclosed.
- ☒ A Credit Card Payment Form PTO-2038 is attached in the amount of \$910.00 (\$120 for 1 mo. EOT, \$790 for RCE).
- ☒ The Director is hereby authorized to charge any deficiencies of the above fees or credit any overpayment to Deposit Account No. 20-0778.



Jeffrey R. Kuester, Reg. No. 34,367

Date